PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

maintenance fee notifica	auons.						
CURRENT CORRESPONI	DENCE ADDRESS (Note: Use BI		Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, mus have its own certificate of mailing or transmission.				
4372	7590 01/27	//2011					
ARENT FOX	HÞ			Ce	rtificate o	f Mailing or Transi	mission
		N1 137		I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUB FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
	TICUT AVENUE, I	N. W.		addressed to the Ma	il Stop IS	SUE FEE address	above, or being facsimile
SUITE 400			transmitted to the USPTO (571) 273-2885, on the date indicated below.				
WASHINGTON	N, DC 20036						(Depositor's name)
							(Signature)
							(Date)
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/533,974 01/27/2006		Stuart Thompson		033108-00001		9600	
TITLE OF INVENTION	N: SURVEILLANCE DE	VICE	·				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID ISSU	JE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0		\$1810	04/27/2011
EXAMINER		ART UNIT	CLASS-SUBCLASS				
KIM, HEE-YONG		2482	348-151000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the patent front page, list ARENT FOX LLP				
	ondence address (or Cha	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,					
Address form PTO/S	ondence address (or Cha B/122) attached.	inge or correspondence					
"Fee Address" inc	lication for "Fee Address	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to					
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2 registered patent attorneys or agents. If no name is 3				
3. ASSIGNEE NAME A	AND RESIDENCE DATA	A TO BE PRINTED ON '	THE PATENT (print o	r type)			
			•	• •	nee is ider	ntified below, the do	ocument has been filed for
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
WQS LTD. ISLE OF MAN, GREAT BRITAIN							
Please check the appropriate assignce category or categories (will not be printed on the patent): 🗖 Individual 💆 Corporation or other private group entity 📮 Government							
4a. The following fee(s)	are submitted:	41:	o, Payment of Fee(s): (Please first reapply a	ny previo	usly paid issue fee s	shown above)
XI Issue Fee							
Publication Fee (No small entity discount permitted) XX Payment by credit card. Form PTO-2038 is attached.							
Advance Order - # of Copies 10 XX The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 01-2300 (enclose an extra copy of this form).							
Advance Order -	# of Copies		overpayment, to I	reny authorized to cha Deposit Account Numb	er01-2	300 - (enclose ar	nestra copy of this form).
5. Change in Entity Sta	tus (from status indicated						
	ns SMALL ENTITY state		D b. Applicant is no	longer claiming SMA	LL ENTIT	l'Y status. See 37 CF	R 1.27(g)(2).
			d from anyone other th	an the applicant: a reg	istered atte	orney or agent; or the	e assignce or other party in
interest as shown by the	records of the United Sta	tes Patent and Trademark	Office.		,		g
Authorized Signature	From	E Oram	7 27931	DateAp	ril 2	2, 2011	
Typed or printed name Tarik Nabi				Registration 1	No	55,478	
This collection of inform	nation is required by 27.0	TER 1311 The information	on le rounired to obtain				by the USPTO to process)
an application. Confiden submitting the complete this form and/or suggest	itiality is governed by 35 d application form to the ions for reducing this but	U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the	 This collection i depending upon the i Chief Information O 	s estimated to take 12 ndividual case. Any c fficer, U.S. Patent and	minutes to omments o Trademar	o complete, including on the amount of tin & Office, U.S. Depa	g gathering, preparing, and ne you require to complete artment of Commerce, P.O. For Patents, P.O. Box 1450,
Alexandria, Virginia 223				Cinformation colors it			

OMB 0651-0033